

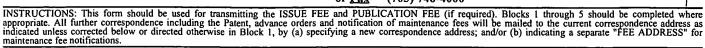
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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10/05/2004 AKE	LECH2 00000086 100	50565	(Depositor's name)
01 FC:1504		300.00 OP	(Signature)
02 FC:2501		682.00 UP	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/050,565	01/18/2002	Bih-Chern Lin	BHT-3214-3	6061

TITLE OF INVENTION: PROTECTING CAP STRUCTURE FOR THE NEEDLE OF A SYRINGE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$685 \$665	\$300	_{\$965} _ \$985	10/14/2004
EXA	MINER	ART UNIT	CLASS-SUBCLASS]	
MAIOR	INO, ROZ	3763	604-192000	•	
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indicate	ce address or indication of "F lence address (or Change of 0 122) attached. tion (or "Fee Address" Indica or more recent) attached. Us	Correspondence (1) the ror agent (2) the registers of a Customer 2 registers	rinting on the patent front page, linames of up to 3 registered paters oR, alternatively, name of a single firm (having as add attorney or agent) and the namered patent attorneys or agents. If on name will be printed.	a member a 2	l Law Office PLIC
PLEASE NOTE: Unles recordation as set forth i (A) NAME OF ASSIGN	s an assignee is identified b n 37 CFR 3.11. Completion NEE		opear on the patent. If an assigned for filing an assignment. NCE: (CITY and STATE OR CO		
_		ories (will not be printed on the		corporation or other private gr	
4a. The following fee(s) are **SIssue Fee **SPublication Fee (No s		4b. Payment of A check d) Payment of Payment of The Direction		closed. is attached. harge the required fee(s), or	credit any overpayment, to
•	s (from status indicated above MALL ENTITY status. See 3	′	cant is not claiming SMALL EN	TITY status. See, e.g., 37 CFF	R 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and I interest as shown by the	is requested to apply the Less Publication Fee (if required) values of the Upited States Pat	ue Fee and Publication Fee (if will not be accepted from anyon and Trademark Office.	any) or to re-apply any previousl ne other than the applicant; a reg	y paid issue fee to the applica istered attorney or agent; or th	tion identified above.

(Authorized Signatur) Bruce H. Troxell

Reg. No. 26,592

October 4, 2004

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)

Attorney Docket: BHT/3214-3

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant

LIN

Application No.

10/050,565

Filed

January 18, 2002

Title

PROTECTING CAP STRUCTURE FOR

THE NEEDLE OF A SYRINGE

Group Art Unit

3763

Examiner

R. Maiorino

Docket No.

BHT/3214-3

TRANSMITTAL COVER SHEET

MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing are the following:

1. Issue Fee Transmittal Form along with a check in the amount of \$985.00 to cover the Small Entity government and Publication fee.

The Commissioner is hereby authorized to charge any additional fees which may be required for the filing of this document to **Deposit Account No. 501874**.

Respectfully submitted,

Date: October 4, 2004

By:

Bruce H. Troxell Reg. No. 26,592

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